



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
REMEDIATION & REDVELOPMENT DIVISION

FOR DEQ USE ONLY

Date/Time Received:

**REFINED PETROLEUM FUND TEMPORARY REIMBURSEMENT PROGRAM (TRP)  
INVOICE SUBMITTAL FORM**

Authority: Section 21559(l)(e)(i) of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended (Act 451). When completed, submit this form and all supporting documentation to the Temporary Reimbursement Program Unit, Department of Environmental Quality, Remediation and Redevelopment Division, P.O. Box 30426, Lansing, MI 48909-7926. For questions contact: Ms. Paula McAllister, (517) 335-7251, e-mail: mcallisp@michigan.gov. Use separate invoice forms for different claim numbers. Except for the last work invoice, an invoice shall not be less than \$5,000. **Both the Qualified Underground Storage Tank Consultant (QC) and the applicant must sign the certification for the invoice to be considered.**

FACILITY NAME:	FACILITY I.D.:	RPF No:
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APPLICANT NAME:	FEDERAL TAX ID:
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APPLICANT CONTACT PERSON:	PHONE No.:	E-MAIL:
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QC CONTACT NAME:	PHONE No.:	E-MAIL:
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INVOICE NUMBER:	DATES OF SERVICE:
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DATE	SERVICES PROVIDED	REASON FOR SERVICE	CHARGES

TOTAL INVOICE AMOUNT:	
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**CERTIFICATION**

We, the undersigned, hereby certify that we have complied with the competitive bidding requirements of Section 21558 of Part 215 of Act 451, and that this work was necessary and appropriate. Pursuant to Section 21324 of Part 213 of Act 451, Section 21548 of Part 215 of Act 451, and Administrative Rule 324.21514(3) of Part 215 of Act 451, we understand that any false, misleading, or fraudulent information contained in this document and all attachments may constitute fraud and may result in the initiation of enforcement proceedings including, but not limited to, felony charges.

QC NAME: \_\_\_\_\_ QC ID: \_\_\_\_\_

_____ Signature	_____ Name of QC Manager Signing	_____ Date
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APPLICANT

_____ Signature	_____ Name of Applicant	_____ Date
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*The Michigan Department of Environmental Quality will not discriminate against any individual or group on the basis of race, color, religion, national origin or ancestry, age, sex, marital status, or handicap.*